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INFORMATION MEMORANDUM

TO: Head Start Grantee and Delegate Agencies

SUBJECT: Partnership with the Environmental Protection Agency

BACKGROUND:

In January 2007, a formal Memorandum of Understanding between the U.S. Environmental Protection Agency (EPA) and the U.S. Department of Health and Human Services (HHS), Office of Head Start (OHS) was signed. EPA and OHS have agreed to work together to improve the health and well-being of Head Start children by implementing a national outreach campaign, "Care for Their Air." This campaign focuses on raising awareness regarding the effects of secondhand smoke on young children and their families, as well as encouraging Head Start staff and parents to reduce children's exposure to secondhand smoke and other indoor environmental asthma triggers.

Secondhand smoke contains more than 4,000 substances, several of which are known to cause cancer in humans or animals. More than 50 carcinogens have been identified in secondhand smoke. Some of these toxic agents include: benzene, chromium, formaldehyde, cyanide and carbon monoxide. There is a growing body of scientific evidence on the hazards of exposing children to secondhand smoke, which is also known as environmental tobacco smoke (ETS). Because their respiratory, immune and nervous systems are still developing, children are particularly vulnerable to the health effects of ETS.

Almost all of a child's exposure to ETS can be attributed to parental smoking whether in the home or in the car. The Administration for Children and Families' (ACF) 2000 Family and Child Experiences Survey showed that almost half (45.1%) of Head Start children lived in households where at least one person smoked cigarettes. According to the 2004 Early Head Start Research and Evaluation Project, 57% of Early Head Start children were exposed to household smoking. These children had a higher rate of asthma or respiratory problems (31%) when compared to children who were not exposed to household smoking (24%). Furthermore, children exposed to household smoking were more likely than those who were not exposed to have ear infections (55% vs. 47%).

In 2006, the U.S. Surgeon General's Report "The Health Consequences of Involuntary Exposure to Tobacco Smoke" was issued. This report revisited the 1986 publication titled "The Health Consequences of Involuntary Smoking" investigating the science, prevalence, and effects of secondhand smoke. The finding most relevant to the Head Start community is that children exposed to secondhand smoke are at increased risk for:

- Sudden Infant Death Syndrome (SIDS)
- Acute respiratory infections
- Ear problems
- More severe asthma

Asthma, a chronic respiratory disease that affects lung function, is the most common chronic childhood disease nationwide, impacting the lives and families of 6.3 million children. Asthma is life-threatening if not controlled. It is not known what causes the onset of asthma or how to cure it. What is known is that preschool-aged children who are exposed to secondhand smoke are at a greater risk for developing asthma. In addition, with the help of asthma medication and reducing or avoiding asthma triggers, attacks can be controlled. Asthma triggers include:

- Environmental Tobacco Smoke (ETS) or Secondhand smoke
- Dust mites
- Cockroaches
- Pet dander
- Molds
- Nitrogen Dioxide – a gas from appliances that burn fuels such as kerosene. High levels can trigger asthma if not properly vented with an exhaust fan or by opening a window.
- Certain medications, inclement weather (e.g., thunderstorms, high humidity, freezing temperatures), some foods or food additives, and, for vulnerable people, certain forms of exercise.

INFORMATION:

The Memorandum of Understanding between OHS and EPA presents an opportunity for both agencies to work together in tailoring EPA's Smoke-free Homes program. The focus of the partnership is to reduce exposure to ETS rather than promote smoking cessation.

EPA's Smoke-Free Homes program is a comprehensive, national effort to reduce children's exposure to ETS. The program reaches out to millions of American families through community outreach and education, national public awareness campaigns and partnerships with governmental agencies. The program provides resource materials (also available in Spanish), trainings, and technical assistance for community organizations interested in promoting a healthier environment for children. Its goals are to raise awareness about asthma and environmental asthma triggers; to help families manage environmental triggers in their homes; and to reduce children's exposure to indoor asthma triggers at schools and day care centers.

There are a variety of strategies Head Start programs can employ to implement a Smoke-Free Homes project. Many of them can be integrated easily into ongoing program activities such as the Community Assessment and Family Partnership Agreement processes, child health records (including asthma action plans), and home visits.

Community Assessment

When developing or updating the Community Assessment, Head Start programs can collect information on: chronic child health conditions, such as asthma; rates of adult smoking; the percentage of children living with a smoker; and death rates due to Sudden Infant Death Syndrome (SIDS). Data sources may reveal community trends and serve as a starting point for integrating targeted strategies into Head Start program plans. Information about community resources that can support program efforts to raise awareness about the effects of ETS and other indoor environmental asthma triggers can be found by contacting local or state health departments, lung associations or the local cancer society.

Family Partnership Agreement

45 CFR 1304.40(a)(2) requires grantee and delegate agencies to work in partnership with parents to develop and implement individualized family partnership agreements. While working with families to identify goals for themselves and their children, family service workers or home visitors have the opportunity to talk with parents about asthma and work together to develop strategies to eliminate their child's exposure to ETS. Some families may choose to include in their Family Partnership Agreement a parent's commitment to take the Smoke-Free Homes Pledge to keep their home and car smoke-free.

Child Health Records

Most child health records include a health history section that asks questions regarding a child's history of disease, such as asthma, ear infections, or other conditions. Head Start programs can include additional questions, for example, whether immediate and extended family members and friends smoke in the home and/or car while children are present. The data can be aggregated to assess the level of exposure to ETS for all children in the program. The Health Services Advisory Committee (HSAC) and/or the Policy Council can use this information to build support for beginning a Smoke-Free Homes project in their program. The information also can be analyzed on an ongoing basis in conjunction with data on absenteeism to determine if a connection can be made between children exposed to smoke in the home or car, chronic ear infections or asthma, and school absenteeism.

It is important for Head Start programs to work in partnership with parents and health care providers to have an asthma action plan in place for children diagnosed with asthma. These plans include information pertaining to a child's asthma triggers, symptoms, medications and what to do in the event of an attack. The Head Start publication, "Caring for Children with Chronic Conditions," contains a [sample asthma action plan](#) that programs may choose to use or modify; it is available on the Early Childhood Learning and Knowledge Center (ECLKC).

Home Visits

Visits to the home offer a unique opportunity to discuss children's exposure to ETS. If there is smoking in the home, home visitors can talk to parents about strategies they can employ to keep the home smoke-free. Suggestions may include asking caregivers and/or family members to take the Smoke-Free Homes Pledge or putting a sticker in the window stating their home is a smoke-free zone. Home visitors can also offer parents written information regarding the dangers of ETS for young children to share with other caregivers and/or family members. Home visitors can also assist parents who are smokers and have taken the Smoke-Free Homes Pledge to come up with a plan for coping with nicotine cravings when it is not possible for them to go outside to smoke.

Home visits give those working with families an opportunity to educate parents regarding information released by the Surgeon General:

- There is no safe level of exposure to ETS. Opening a window or using a fan is not enough. The only way to protect children from ETS is to not smoke around them.
- ETS lingers in the fabric of cars and furniture. Even when children are not present in the home or car, these environments must be kept smoke free.
- ETS lingers in hair and on clothing even after smoking. This is of particular concern for those who smoke and then hold and care for infants.

Resources

The Office of Head Start has developed an [electronic toolkit and a series of tip sheets](#), found on the ECLKC, about what programs can do to protect children from being exposed to ETS.

In addition, there are EPA resources available free of charge to the Head Start community on the EPA website <http://www.epa.gov/iaq/headstart/>.

Thank you for your support in this important effort to protect the health of children in Head Start and in Early Head Start.

/ Patricia E. Brown /

Patricia E. Brown
Acting Director
Office of Head Start